

Criminal Justice | Mental Health

CONSENSUS PROJECT

coordinated by the
Council of State Governments

Overview:



Activities at Local, State, and Federal levels

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Presentation Overview

- Overview of Consensus Project
- Diversion and lessons learned
- Mental Health Courts
- Overview of Advocacy Handbook
- Mentally Ill Offender Treatment and Crime Reduction Act (P.L. 108-414)

Overview of Consensus Project

- Bipartisan, national initiative to improve the response to people with mental illness who become involved in the criminal justice system
- Comprehensive report released June 2002
- Current focus on implementation of report recommendations
- Current activities include:
 - Technical assistance
 - Web site
 - Select policy initiatives (federal benefits, crime victims with mental illness)
 - Advocacy handbook



What is the Council of State Governments?

- Non-profit, non-partisan membership association of state govt. officials
- Funded largely through state dues
- Represents all three branches of state government: legislature, judiciary, and executive branch
- 4 Regional Offices
- Provides non-partisan setting to discuss controversial criminal justice topics outside of the public spotlight

What is the Consensus Project?

A national initiative to define measures that all stakeholders in the criminal justice and mental health systems agree would improve the response to people with mental illness who are involved in the criminal justice system.

Why the Consensus Project?

- Prevent tragedies from driving policy
- Preempt the possibility of federal mandates
- Establish a forum to consult stakeholder groups, which appear to have conflicting views on the issue
- Provide a resource to practitioners in the criminal justice and mental health systems
- Respond to current state budget crises

Central Features

- **Bipartisan:** Republican and Democrat co-chairs
- **Cross-system:** Includes key stakeholders from mental health, law enforcement, courts, corrections
- **Consensus:** Focuses on areas where agreement can be reached

Organization

- **Steering Committee:** representative organizations from criminal justice and mental health systems
- **Advisory Boards:** 4 Advisory Boards, over 100 total members
- **Funding:** U.S. Dept. of Justice, U.S. Dept. of Health and Human Services, 5 private foundations and two private sector companies

Advisory Boards and Coordinators

Mental Health



National Association of State Mental
Health Program Directors

Law Enforcement



Courts



Corrections



**Association of State
Correctional Administrators**

A Person with Mental Illness in the Criminal Justice System: A Flowchart of Select Events

- Involvement with the Mental Health System
- Contact with Law Enforcement
- Pretrial Issues, Adjudication, and Sentencing
- Incarceration and Re-entry

Diversion Strategies

- Pre-booking diversion
 - CIT
- Post-booking diversion
 - Court-based ■

Diversion to what?

Diversion Requires Linkages

Diversion Program

- Police
- Arraignment Court
- Jail

Community-Based Services

- MH
 - Outpatient
 - Residential
- SA
 - Outpatient
 - Residential
- Co-Occurring
- Housing
- Health
- Entitlements
- Employment

Linkage
(Case Management)

General Findings

- It is significantly more expensive to provide mental health and substance abuse treatment in the criminal justice system than in the community
- Many of the individuals with mental illness in the justice system are 'revolving door' clients
- Coordinated efforts between criminal justice and mental health systems can ensure a more effective use of resources

Key Lessons Learned

- Cost shifting to criminal justice system is an expensive and losing proposition over the long term
- Investing in community-based diversion programs saves money and lives
- Effective diversion requires collaboration and systems integration
- Integrated treatment for co-occurring SA/MH disorders and stable housing are essential components for reduction of jail and hospital use

Key Lessons Learned

Systems integration requires sharing of:

- Information
- Planning
- Clients
- Resources
- Responsibility



Spend dollars on what you know works: Evidence-based promising practice models exist and can be replicated

Diversion Outcomes

- Reduction in costs
- Reduction in jail days
- Reduction in recidivism

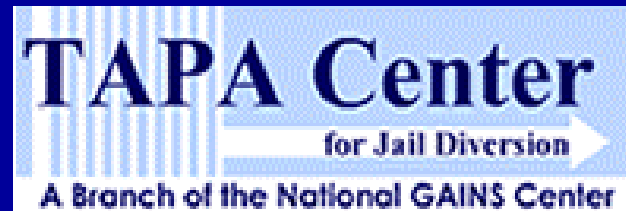
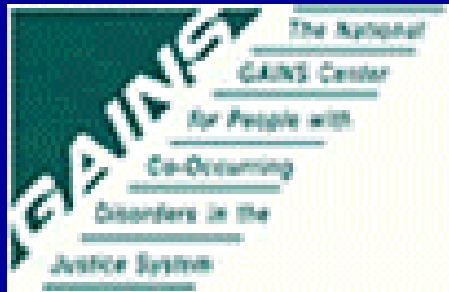


What is a Mental Health Court?

- Definition is not settled / New phenomenon
- Some common features:
 - Criminal courts
 - Separate dockets for offenders with MI
 - Treatment over jail
 - Monitors compliance

Survey of Mental Health Courts

- <http://www.mentalhealthcourtsurvey.com/>
- There are 110 mental health courts listed in this survey, last updated in December 2004



**CRIMINAL JUSTICE/
MENTAL HEALTH
CONSENSUS PROJECT**

Emerging Trends Among Mental Health Courts

- “If you’ve seen one mental health court ...”
- MHCs are fueled by imperatives of problem and anecdotal evidence of success, not data.
- MHCs spur cross-system collaboration
- Coordination with related activities (e.g., diversion, drug courts) appears to be ad hoc and insufficient
- Evaluation is often an afterthought

Overview of Advocacy Handbook

- Comprehensive guide for advocates interested in criminal justice issues.
- Focus on implementation – what can advocates to do implement the policy statements of the Consensus Project Report
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- Project partners – NAMI, NMHA, NASMHPD, CSG, Bazelon Center
- Includes examples of advocacy initiatives
- System advocacy (not individual advocacy)
- Expected date of completion – Fall 2004

Advocacy Handbook Chapters

- 1 Problem statement
- 2 Roles of advocates, consumers, and family members in addressing the problem
- 3 Key elements of an effective advocacy initiative
- 4 Where an advocate should start
- 5 What resources are available to advocates
- 6 How to engage key policy makers
- 7 How to engage the media
- 8 How to work with law enforcement, corrections, courts, mental health
- 9 Advocacy in the context of the budget crisis
- 10 Juvenile justice and mental health
- 11 Legal rights of a person with mental illness in the justice system

Federal Legislation: Mentally Ill Offender Treatment and Crime Reduction Act (P.L. 108-414)

- Authorizes \$50M per year for grants to improve collaboration between criminal justice and mental health agencies
- **Senate Sponsors:** DeWine (R-OH), Leahy (D-VT), Hatch (R-UT), Grassley (R-IA), Cantwell (D-WA), Durbin (D-IL), and Domenici (R-NM) ■
- **House Sponsors:** Strickland (D-OH), Bachus (R-AL), Murphy (R-PA), Smith (R-TX), Ramstad (R-MN), Delahunt (D-MA), Scott (D-VA)
- Signed by President 10/30/04
- **Not funded in FY 2005**

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